SEE INSTRUCTIONS ON REVERSE State Mailer Organization Information	Slate Mailer Organiz Campaign Statemer (Government Code Sections 84218-8421			Type or pri	or print in ink.				Date Stamp	CALIFORNIA 1992 FORM 401	
I Slate Mailer Organization Information FILL NAME OF SLATE MAJES ORGANIZATION OUR VOICE, LATINO VOTER GUIDE ADDRESS NO AND STREET DAY/ID GOULD ADDRESS NO AND STREET DAY/IMPRISORE DAY/IMP PHONE NUMBER CTY STATE ZIP CODE DAYTIME PHONE NUMBER Total This Pariod (S) Cumulation to Due (Since Jamus) of calendar year covered) 1 TOTAL PAYMENTS RECEIVED \$ 51438.67 Sin. A, Line 3 1 TOTAL PAYMENTS RECEIVED \$ 1647.30 Sin. B, Line 3 Sin. B, Line 3 Sin. B, Line 3 NO AND STREET DAY/ID GOULD ATTORIS (S) Cumulation to Due (Since Jamus) of calendar year covered) 1 TOTAL PAYMENTS RECEIVED \$ 1647.30 Sin. B, Line 3 Sin. A, Line 3 Sin. A, Line 3 Sin. A, Line 3 Sin. A, Line 3 Sin. B, Line 3 Sin. B, Line 3 Sin. A, Line 3 Sin. A, Line 3 Sin. A, Line 3 Sin. A, Line 3 Sin. B, Line 3 Sin. A, Line 3	SEE INSTRUCTIONS ON REVERSE					State	ement Co	overs Period			
IS State Mailer Organization Information FILL NAME OF SEATE MALER ORGANIZATION: OUR VOICE, LATINO VOTER GUIDE S99015 DOWN VOICE, LATINO VOTER GUIDE NO AND STREET DOWN STATE 2P CODE DAYIME PHONE NUMBER DAYIME PHONE NUMBER Total This Period (B) Cumulative to Date (Since January 1 of cellendary pair covered) Collendary pair overency 1 TOTAL PAYMENTS RECEIVED S 1438.67 Sth. A. Line 3 TOTAL PAYMENTS MADE S 1647.30 Sol. B. Line 3 SOL B. Line 3 SOL SAL	OLE INOTROOTIONS ON REVERSE					from	07/01/	2020			
FILL INMARE OF SILATE MILLER ORGANIZATION: OUR VOICE, LATINO VOTER GUIDE ADDRESS NO AND STREET DITY STATE LONG BEach CA 90802 FROME NUMBER CITY STATE LONG BEach CA 90802 III Summary of Payments CITY STATE LONG BEACH CA 90802 III Summary of Payments (A) Total This Period Cischard year overed) TOTAL PAYMENTS RECEIVED TOTAL PAYMENTS RECEIVED TOTAL PAYMENTS MADE SM. Line 3 TOTAL PAYMENTS MADE TOTAL PAYMENTS MADE SM. Line 3 TOTAL PAYMENTS MADE AT LONG BEACH							09/19/	2020			FOR OFFICIAL USE ONLY
OUR VOICE, LATINO VOTER GUIDE 599015			າ			II <u>Is</u>	This A	A General F	ourpos	se Committee?	
ADDRESS NO AND STREET disclosure report to this statement. CITY STATE ZIP CODE PHONE NUMBER LONG BEACH CA 90802 CITY STATE ZIP CODE DAYTIME PHONE NUMBER CITY STATE ZIP CODE DAYTIME PHONE NUMBER LONG BEACH CA 90802 III Summary of Payments (A) (B) Cumulative to Date (Since January 1 of Callendar year covered) 1 TOTAL PAYMENTS RECEIVED 1 TOTAL PAYMENTS RECEIVED 3 1438.67 (Sch. A. Line 3 Sch. B. Line 3						If t	his Slate	e Mailer Organ nt Code Section	ization i	s also a "general purpose 7.5, check box and attach	e committee" as defined in
Long Beach CA 90802 Committee Report Attached Recipient Committee DAVID GOULD ADDRESS NO AND STREET CITY STATE ZIP CODE DAYTIME PHONE NUMBER Long Beach CA 90802 III Summary of Payments (A) Total This Period Cumulative to Date (Since January 1 of calendar year covered) 1 TOTAL PAYMENTS RECEIVED 2 TOTAL PAYMENTS MADE 5 1647.30 Sob. B. Line 3 IV Verification I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 03/21/2020 DATE David L. Gould CA Title: Treasurer Committee Report Attached Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee Recipient Committee	ADDRESS	NO A	ND STREET		_	dis	closure	report to this s	stateme	nt.	
NAME OF TREASURER: DAVID GOULD ANDRESS NO AND STREET CITY STATE ZIP CODE DAYTIME PHONE NUMBER Long Beach CA 90802 III Summary of Payments (A) Total This Period Cumulative to Date (Since January 1 of calendar year covered) Calendar year covered) 1 TOTAL PAYMENTS RECEIVED \$ 51438.67 Sch. A. Line 3 2 TOTAL PAYMENTS MADE \$ 1647.30 Sch. B. Line 3 IV Verification I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 09/21/2020 DATE Name of Responsible Officer David L. Gould CA Title: Treasurer	CITY S	TATE ZIP C	CODE	PHONE NUMBER	₹						
DAVID GOULD ADDRESS NO AND STREET CITY STATE ZIP CODE DAYTIME PHONE NUMBER Long Beach CA 90802 III Summary of Payments (A) Total This Period (Since January 1 of Calendar year covered) StA, A, Line 3 TOTAL PAYMENTS RECEIVED SA, A, Line 3 TOTAL PAYMENTS MADE \$ 1647.30 Sch. B, Line 3 Sch. B, Line 3 Sch. B, Line 3 IV Verification I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 09/21/2020 DATE CITY AND STATE David L. Gould CA Title: Treasurer		A 908	802						Report		
ADDRESS NO AND STREET CITY STATE ZIP CODE DAYTIME PHONE NUMBER Long Beach CA 90802 III Summary of Payments (A) Total This Period (B) Cumulative to Date (Since January 1 of calendar year covered) TOTAL PAYMENTS RECEIVED \$ 51438.67 Sch. A. Line 3 2 TOTAL PAYMENTS MADE \$ 1647.30 Sch. B. Line 3 IV Verification I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 09/21/2020 At Long Beach DATE OITY AND STATE By David L. Gould CA Title: Treasurer								Attached			Recipient Committee
Long Beach CA 90802 Summary of Payments		NO A	ND STREET								
Summary of Payments	CITY S	TATE ZIP C	CODE	DAYTIME PHONE	E NUMBER						
TOTAL PAYMENTS RECEIVED \$ 51438.67	Long Beach C	A 908	02								
Total This Period Cumulative to Date (Since January 1 of calendar year covered) 1 TOTAL PAYMENTS RECEIVED \$ 51438.67 Sch. A, Line 3 \$ 77373.17 2 TOTAL PAYMENTS MADE \$ 1647.30 Sch. B, Line 3 \$ 32516.41 IV Verification I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 09/21/2020 At Long Beach By David L. Gould CA Name of Responsible Officer David L. Gould CA Title: Treasurer	III Summary of Payments				(Δ)					(B)	
2 TOTAL PAYMENTS MADE \$ 1647.30				_	Total	d				Cumulative to Date (Since January 1 of	
IV Verification I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on09/21/2020	1 TOTAL PAYMENTS RECEIVED			\$					\$_	77373.17	
I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 09/21/2020	2 TOTAL PAYMENTS MADE			\$					\$_	32516.41	
herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 09/21/2020	IV Verification										
DATE CITY AND STATE SIGNATURE OF RESPONSIBLE OFFICER Name of Responsible Officer David L. Gould CA	herein and in the attached s										
Name of Responsible Officer David L. Gould CA Title: Treasurer	EXCOURCE OIL	20 A	`————			By _	David	L. Gould C	A		
Name of Responsible Officer	DATE		CITY AN	ID STATE					SIG	GNATURE OF RESPONSIBLE OI	FFICER
TYPE OR PRINT	Name of Responsible Officer					Title	:Tr	easurer			
		TYPE C	OR PRINT								

Sched	ulo A					SCHEDULE A	
			Statem	ent covers period			
Payme	ents Received		from	07/01/2020		/1111	
			""	0770172020	1002101		
SEE INISTR	UCTIONS ON REVERSE		through	09/19/2020)	/17	
	SLATE MAILER ORGANIZATION:				I.D NUMBER		
OUR VOIC	CE,LATINO VOTER GUIDE				599015		
(1)	(2)	(3)			(4)	(5)	
	()	(a)		(b)	. ,	. ,	
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT WA SUPPORT CANDIDATE	TO INDICATE IF AS RECEIVED TO FOR OPPOSE OR MEASURE I SLATE MAILER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE	
			SUPPORT	OPPOSE			
08/04/2020 I	Susan Sonne for Buena Park City Council	Susan Sonne	х		100.00	100.00	
I		City Council Member					
	Buena Park CA 90620						
	Reference No:	Buena Park					
08/10/2020	Allyson M Damikolas for School Boa - rd 2020	Allyson M Damikolas	х		100.00	100.00	
l		Board of Education					
	Long Beach CA 90802 Reference No:						
08/10/2020	Think Fink for Tustin City Council 2020	Think Fink	х		167.00	167.00	
I		City Council Member					
	Long Beach CA 90802	,					
	Reference No:	City of Tustin					
				SUBTOTAL	\$		
Summa	ry				<u> </u>		
1. Amount (Include	t Received - Payments of \$100 or More e all Schedule A subtotals)	\$	51	438.67			
2. Amount (Not ite	t Received - Payments of Less than \$10 mized)	0\$	i	0.00			
3. Total Pa	ayments Received (Line 1 + Line 2) Ente	er here and in section on Page 1\$	S 51	438.67			

	Schedule A			ent covers period	CALIFOR	SCHEDULE A		
Payme	ents Received		from	07/01/2020		/1 / 1 / 1		
	UCTIONS ON REVERSE		through	00/40/000) 3/	17		
NAME OF S	SLATE MAILER ORGANIZATION:				I.D NUMBER			
	E,LATINO VOTER GUIDE				599015			
(1)	(2)	(3)			(4)	(5)		
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT WAS SUPPORT CANDIDATE	TO INDICATE IF AS RECEIVED TO OR OPPOSE OR MEASURE I SLATE MAILER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE		
			SUPPORT	OPPOSE				
08/11/2020 	Alex Vargas for Mayor 2020	Alex Vargas	X		335.00	335.00		
'		Mayor						
	Hawthorne CA 90250 Reference No:	City of Hawthorne						
08/11/2020 I	Eric Pierce for Downey City Counci - I 2020	Eric Pierce	Х		211.00	211.00		
Ī		City Council Member						
	Long Beach CA 90802 Reference No:	City of Downey						
08/11/2020	Gipson for Assembly 2020	Mike Gipson	Х		366.00	366.00		
ı		State Assembly Person						
	Long Beach CA 90802 Reference No:							
Summa	rv			SUBTOTAL	\$			
1. Amount	t Received - Payments of \$100 or More	\$_						
2. Amount (Not iter	t Received - Payments of Less than \$100 mized)) \$						
3. Total Pa	ayments Received (Line 1 + Line 2) Ente A, Line 1, of the Summary of Payments	r here and in section on Page 1\$						

Sched	ule A				SCHEDULE A	
Payme	ents Received		Statem	ent covers period	CALIFOR	/1 / 1 / 1
•			from	07/01/2020	1992 FOR	M 401
SEE INSTR	UCTIONS ON REVERSE		through	09/19/2020) 4/	17
	SLATE MAILER ORGANIZATION:				I.D NUMBER	
OUR VOIC	CE,LATINO VOTER GUIDE				599015	
(1)	(2)	(3)			(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT WAS SUPPORT CANDIDATE	TO INDICATE IF AS RECEIVED TO OR OPPOSE OR MEASURE I SLATE MAILER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
			SUPPORT	OPPOSE		
08/11/2020 I	Mario Trujillo for Downey City Cou - ncil 2020	Mario Trujillo	Х		596.00	596.00
ı		City Council Member				
	Long Beach CA 90802 Reference No:	City of Downey				
08/11/2020	Mazen Nabulsi for Cerritos College Board 2020	Mazen Nabulsi	х		343.00	343.00
Į		Board of Education				
	Long Beach CA 90802 Reference No:	Cerritos				
08/11/2020	Nazarian for Assembly 2020	Adrin Nazarian	Х		317.00	697.00
I		State Assembly Person				
	Covina CA 91722 Reference No:					
Summa	r.v			SUBTOTAL	\$	
1. Amount	t Received - Payments of \$100 or More e all Schedule A subtotals)	\$				
2. Amount (Not ite	t Received - Payments of Less than \$100 mized)) \$	5			
3. Total Pa Column	ayments Received (Line 1 + Line 2) Entent A, Line 1, of the Summary of Payments	er here and in section on Page 1\$	S			

Sched			Statem	ent covers period	SCHEDULE A		
Payme	ents Received		from	07/01/2020	CALIFOR 1992 FOR	/	
SEE INSTR	EUCTIONS ON REVERSE		through	09/19/2020	5/	17	
	SLATE MAILER ORGANIZATION:				I.D NUMBER		
OUR VOI	CE,LATINO VOTER GUIDE				599015		
(1)	(2)	(3)			(4)	(5)	
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT WA SUPPORT CANDIDATE	(b) TO INDICATE IF S RECEIVED TO OR OPPOSE OR MEASURE SLATE MAILER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE	
			SUPPORT	OPPOSE			
08/12/2020 I	Clark for City Council 2020	Leticia Clark	X		209.00	209.00	
ı	04 00000	City Council Member					
	Long Beach CA 90802 Reference No:	City of Tustin					
08/12/2020	Reyes English Hawthorne Council 2020	Angie Reyes English	Х		268.00	268.00	
1		City Council Member					
	Long Beach CA 90802 Reference No:	City of Hawthorne					
08/17/2020	Andre Quintero for Mayor 2020	Andre Quintero	Х		368.67	368.67	
I		Mayor					
	Long Beach CA 90802 Reference No:	El Monte					
Summa	rv			SUBTOTAL	5		
1. Amount	t Received - Payments of \$100 or More	\$					
2. Amount (Not ite	t Received - Payments of Less than \$10 mized)	0\$	i				
	ayments Received (Line 1 + Line 2) Enternal A. Line 1, of the Summary of Payments		3				

	Schedule A Payments Received			ent covers period	CALIFOR	SCHEDULE A		
rayiile	ints Neceived		from	07/01/2020		/		
SEE INSTR	UCTIONS ON REVERSE		through	09/19/2020	6/	17		
NAME OF S	SLATE MAILER ORGANIZATION:					I.D NUMBER		
OUR VOIC	CE,LATINO VOTER GUIDE				599015			
(1)	(2)	(3)			(4)	(5)		
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT WA SUPPORT CANDIDATE	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE		
			SUPPORT	OPPOSE				
08/17/2020 	Dr. Gutierrez for Mayor 2020	Yxstian Alberto Gutierrez	X		325.00	325.00		
·		Mayor						
	Long Beach CA 90802 Reference No:	Moreno Valley						
08/18/2020 	Hugo Rojas for Water Board 2020	Hugo Rojas	Х		348.00	348.00		
'		Other Water Board Member						
	Long Beach CA 90802 Reference No:	West Basin Municipal Water Dist.						
08/18/2020 I	Yes on 21 Renters & Homeowners Uni - ted to Keep Families in Their Homes,Sponso	Yes On 21 Rental Affordable Act red by AIDS Healthcare Foundation	Х		18468.00	18468.00		
1		Other						
	Los Angeles CA 90024 Reference No:							
Summa	rv			SUBTOTAL	\$			
1. Amount	t Received - Payments of \$100 or More	\$ _						
2. Amount (Not iter	t Received - Payments of Less than \$100 mized)	\$						
3. Total Pa Column	ayments Received (Line 1 + Line 2) Enter A, Line 1, of the Summary of Payments	r here and in section on Page 1\$						

Sched	Schedule A				wore perio	4		SCHEDULE A
Payme	ents Received		from	m07/01/2020			CALIFORI 1992 FOR	/1111
SEE INSTR	UCTIONS ON REVERSE		thro		9/19/2020		7/	17
	SLATE MAILER ORGANIZATION:						I.D NUMBER	
OUR VOIC	CE,LATINO VOTER GUIDE						599015	
(1)	(2)	(3)					(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT SUPP CANDIDA	(b) OX TO IND WAS RECORT OR OF ATE OR ME	EIVED TO PPOSE ASURE		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
			SUPPOR	<u> </u>	PPOSE	-		
08/19/2020	David Berger for Judge 2020	David Berger	x				600.00	1509.00
'		Superior Court Judge						
	Long Beach CA 90802 Reference No:	Los Angeles Superior Court						
08/19/2020	Debra Porada for City Council	Debra Porada	×				700.00	700.00
ı		City Council Member						
	Ontario CA 91762 Reference No:	City of Ontario						
08/19/2020	Myanna Falker Dellinger	Myanna Dellinger	X				6009.00	6009.00
I		Superior Court Judge						
	Long Beach CA 90802 Reference No:	Los Angeles Superior Court						
Summa	w			SU	BTOTAL	\$		
Summa								-
1. Amount (Include	t Received - Payments of \$100 or More e all Schedule A subtotals)	\$						
2. Amount (Not ite	t Received - Payments of Less than \$100 mized)) \$	S					
3. Total Pa Column	ayments Received (Line 1 + Line 2) Ente n A, Line 1, of the Summary of Payments	er here and in section on Page 1\$	S					

	Schedule A Payments Received				CALIFOR 1992 FOR	/1111
SEE INSTR	UCTIONS ON REVERSE		through	09/19/2020	<u>) </u>	17
	SLATE MAILER ORGANIZATION:				I.D NUMBER	
OUR VOIC	CE,LATINO VOTER GUIDE				599015	
(1)	(2)	(3)			(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT WA SUPPORT CANDIDATE	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
			SUPPORT	OPPOSE		
08/19/2020	Victoria E. Baca	Victoria Baca	Х		133.00	133.00
I		City Council Member				
	Moreno Valley CA 92557 Reference No:	Moreno Valley				
08/26/2020 I	Coalition for Community College Excellence	David Vela	Х		2500.00	2500.00
ı		Community Colleage Board				
	Los Angeles CA 90017 Reference No:	Los Angeles Comm.College District				
08/26/2020	Coalition for Community College Excellence	Mike Fong	Х		2500.00	2500.00
ı		Community Colleage Board				
	Los Angeles CA 90017 Reference No:	Los Angeles Comm.College Dist.				
				SUBTOTAL	\$	
Summa	ry				<u> </u>	
1. Amount (Include	t Received - Payments of \$100 or More e all Schedule A subtotals)	\$ <u>.</u>				
2. Amount (Not iter	t Received - Payments of Less than \$100 mized)) \$				
3. Total Pa	ayments Received (Line 1 + Line 2) Ente A, Line 1, of the Summary of Payments	r here and in section on Page 1\$				

	Schedule A Payments Received			ent covers period	CALIFOR	/
	UCTIONS ON REVERSE		from through	07/01/2020	9/	17
NAME OF S	SLATE MAILER ORGANIZATION:				I.D NUMBER	
	CE,LATINO VOTER GUIDE	I (0)			599015	(5)
(1)	(2)	(3)	I	(h)	(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	IURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
			SUPPORT	OPPOSE		
08/26/2020 I	Coalition for Community College Excellence	Michelle Henderson	Х		2500.00	2500.00
'		Community Colleage Board				
	Los Angeles CA 90017 Reference No:	Los Angeles Comm.College Dist.				
08/26/2020 I	Coalition for Communiy College Exc - ellence	Andra Hoffman	Х		2500.00	2500.00
1		Community Colleage Board				
	Los Angeles CA 90017 Reference No:	Los Angeles Comm.College Dist.				
08/26/2020	Fields for City Council 2020	Eugene Fields	×		100.00	100.00
I		City Council Member				
	Orange CA 92866 Reference No:	City of Orange				
Summa	rv			SUBTOTAL	\$	
1. Amount	Received - Payments of \$100 or More	\$				
2. Amount (Not iter	Received - Payments of Less than \$100 mized)) \$				
3. Total Pa	ayments Received (Line 1 + Line 2) Ente A, Line 1, of the Summary of Payments	r here and in section on Page 1\$	i			

Sched	ule A	SCHI						
Payme	ents Received			statem om	ment covers period 07/01/2020		CALIFORNIA 401	
			"	JIII	07/01/202	.0	1002101	
SEE INSTR	UCTIONS ON REVERSE		th	rough	09/19/202	20	10)/17
	SLATE MAILER ORGANIZATION:						I.D NUMBER	
OUR VOIC	CE,LATINO VOTER GUIDE						599015	
(1)	(2)	(3)					(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYME SUI CAND	NT WA	(b) TO INDICATE IF S RECEIVED TO OR OPPOSE OR MEASURE SLATE MAILER		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
			SUPP	ORT	OPPOSE			
08/26/2020 I	Gameros for Costa Mesa Council in 2020	Loren Gameros	×	(100.00	100.00
'		City Council Member						
	Irvine CA 92618 Reference No:	City of Costa Mesa						
08/26/2020 I	Pimentel for College Board 2020	John Pimentel)	(475.00	475.00
I		Community Colleage Board						
	Sacramento CA 95814 Reference No:	San Mateo Comm.College Dist						
08/26/2020	Rafael Brugueras 2020	Rafael Brugueras	>	(175.00	175.00
I		City Council Member						
	Moreno Valley CA 92555 Reference No:	City of Moreno Valley						
Summa	P1.7				SUBTOTAL	\$		
Summa								
1. Amount (Include	t Received - Payments of \$100 or More e all Schedule A subtotals)	\$						
2. Amount (Not ite	t Received - Payments of Less than \$10 mized)	O \$	S					
3. Total Pa Column	ayments Received (Line 1 + Line 2) Ente A, Line 1, of the Summary of Payments	er here and in s section on Page 1\$	\$					

Sched	ule A ents Received		Statem	ent covers period	CALIFOR	SCHEDULE A
i ayiiic	into Neceivea		from	07/01/2020		/1111
	UCTIONS ON REVERSE		through	09/19/2020		1/17
NAME OF S	SLATE MAILER ORGANIZATION:				I.D NUMBER	
	CE,LATINO VOTER GUIDE			T	599015	T (5)
(1)	(2)	(3)	1	4.)	(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT WA SUPPORT CANDIDATE	(b) FO INDICATE IF S RECEIVED TO OR OPPOSE OR MEASURE SLATE MAILER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
			SUPPORT	OPPOSE		
08/26/2020 I	Richard Hurt for City Council 2020	Richard Hurt	X		910.00	910.00
'		City Council Member				
	Inglewood CA 90301 Reference No:	City of Aliso Viejo				
09/02/2020	Alvarez for Water Board 2020	Desi Alvarez	х		192.00	192.00
I		Other Water Board Member				
	Inglewood CA 90301 Reference No:	West Basin Municipal Water Dist.				
09/02/2020	Arun Goel for Mayor 2020	Arun Goel	Х		100.00	100.00
I		Mayor				
	Dublin CA 94568 Reference No:	City of Dublin				
Summa	r v			SUBTOTAL	\$	
1. Amount	t Received - Payments of \$100 or More	\$	·			
2. Amount (Not iter	t Received - Payments of Less than \$10 mized)	0\$	i			
3. Total Pa	ayments Received (Line 1 + Line 2) Ento	er here and in	S			

Sched	ule A				SCHEDULE A		
	ents Received		Statem	ent covers period	CALIFOR	CALIFORNIA A A A	
			from	07/01/2020	1992 FOR	M 401	
SEE INSTR	UCTIONS ON REVERSE		through	09/19/2020)	2/17	
	SLATE MAILER ORGANIZATION:				I.D NUMBER		
OUR VOIC	CE,LATINO VOTER GUIDE				599015		
(1)	(2)	(3)			(4)	(5)	
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	PAYMENT WAS SUPPORT CANDIDATE	TO INDICATE IF AS RECEIVED TO TOR OPPOSE OR MEASURE I SLATE MAILER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE	
			SUPPORT	OPPOSE			
09/02/2020 	Pamela Braunstein	Pamela Braunstein	Х		100.00	100.00	
'		Board of Education					
	Ladera Ranch CA 92694 Reference No:	Capistrano Unified School Board Trustee					
09/02/2020	Committee to Elect Albert Vera to Culver City City Council 2020	Albert Vera	х		113.00	113.00	
ı		City Council Member					
	Culver City CA 90230 Reference No:	City of Culver City					
09/02/2020	Medina for State Senate 2020	Abigail Medina	Х		951.00	951.00	
ı		State Senator					
	San Francisco CA 94104 Reference No:						
Summa	rv			SUBTOTAL	\$		
	t Received - Payments of \$100 or More						
(Include	e all Schedule A subtotals)	\$					
2. Amount (Not ite	t Received - Payments of Less than \$100 mized)) \$	j				
3. Total Pa Column	ayments Received (Line 1 + Line 2) Entent A, Line 1, of the Summary of Payments	r here and in section on Page 1\$	S				

Schedule A		Statement covers period		OALIFOR	SCHEDULE A	
Payme	ents Received		from	07/01/2020	CALIFOR	/
			"""_	0170172020		
SEE INSTR	UCTIONS ON REVERSE		through	09/19/2020	13	3/17
	SLATE MAILER ORGANIZATION:		<u>_</u>		I.D NUMBER	
OUR VOIC	CE,LATINO VOTER GUIDE				599015	
(1)	(2)	(3)			(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	(b) CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
			SUPPORT	OPPOSE		
09/09/2020 	Wesson for Supervisor 2020	Herb Wesson	Х		3753.00	3753.00
'		County Supervisor				
	Los Angeles CA 90017 Reference No:	Los Angeles				
09/10/2020	Terris Barnes Walters Boigon Heath Lester,Inc.	Kimbley Craig	Х		520.00	520.00
I		Mayor				
	San Francisco CA 94104 Reference No:	City of Salinas				
09/11/2020	JUAN GARZA FOR WATER REPLENISHN DIST.	IENJuan Garza	х		2500.00	2500.00
ı		Other Water Board Member				
	Long Beach CA 90802 Reference No:	Water Replenishment of So.Calif.				
Summa	rv			SUBTOTAL	\$	
1. Amount	t Received - Payments of \$100 or More	\$				
2. Amount (Not ite	t Received - Payments of Less than \$10 mized)	O \$	i			
3. Total Pa	ayments Received (Line 1 + Line 2) Ente	er here and in	S			

Sched	ulo A					SCHEDULE A
Payments Received			Statement covers period		CALIFOR	
Payme	ents Received		from	07/01/2020		/1111
SEE INSTR	UCTIONS ON REVERSE		through			4/17
	SLATE MAILER ORGANIZATION:		•		I.D NUMBER	
OUR VOIC	CE,LATINO VOTER GUIDE				599015	
(1)	(2)	(3)			(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	\$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR DEPOSED SUPPORT OR OPPOSE SUPPORT OR OPPOSE CANDIDATE OF MEASURE		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE	
			SUPPORT	OPPOSE		
09/16/2020 I	Doug Halter for Ventura City Counc - il 2020	Dough Halter	Х		100.00	100.00
Į.		City Council Member				
	Ventura CA 93001 Reference No:	City of Ventura				
09/16/2020	Emily Weisberg for School Board 2020	Emily Weisberg	Х		355.00	355.00
Į		Board of Education				
	Encino CA 91436 Reference No:	Burbank Unified School District				
09/16/2020	Mike Carroll for Irvine City Counc - il	Mike Carroll	х		330.00	330.00
-		City Council Member				
	Irvine CA 92618 Reference No:	City of Irvine				
Summa	* 14			SUBTOTAL	\$	
1. Amount (Include	t Received - Payments of \$100 or More	\$				
2. Amount (Not ite	t Received - Payments of Less than \$10 mized)	0\$	i			
3. Total Pa	ayments Received (Line 1 + Line 2) Ente	er here and in s section on Page 1\$	S			

Schedule A		Statement covers period		CALIFOR	SCHEDULE A	
Payme	ents Received		from	07/01/2020	CALIFOR 1992 FOR	/
	UCTIONS ON REVERSE		through	09/19/2020		5/17
NAME OF S	SLATE MAILER ORGANIZATION:				I.D NUMBER	
OUR VOI	CE,LATINO VOTER GUIDE				599015	
(1)	(2)	(3)			(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a) NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	(b) CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
			SUPPORT	OPPOSE		
09/16/2020 I	Pmcohen Public Affairs	Mark Lubamersky	X		100.00	100.00
'	On Defect	Other Water Board Member				
	San Rafael CA 94915 Reference No:	Marin Municipal Water District				
09/16/2020	Pmcohen Public Affairs	Larry Russell	X		100.00	100.00
ı		Other Water Board Member				
	San Rafael CA 94915 Reference No:	Marin Municipal Water District				
09/17/2020	David Berger for Judge 2020	David Berger	X		501.00	1509.00
ı		Superior Court Judge				
	Long Beach CA 90802 Reference No:	Los Angeles Superior Court				
Summa				SUBTOTAL	51438.67	
Summa 1. Amount (Include	t Received - Payments of \$100 or More	\$				
2. Amount (Not ite	t Received - Payments of Less than \$10 mized)	0\$;			
	ayments Received (Line 1 + Line 2) Ente A. Line 1, of the Summary of Payments					

Schedule B Payments Made		Statement covers period from07/01/2020	CALIFORNIA 401
SEE INSTRUCTIONS ON REVERSE NAME OF SLATE MAILER ORGANIZATION: OUR VOICE,LATINO VOTER GUIDE		through09/19/2020	16/17 I.D NUMBER 599015
NAME AND STREET ADDRESS OF PAYEE	DESCRIPTION OF PAYMENT		AMOUNT PAID
Coalition For Senior Citizen Security	Transfer		500.00
Long Beach CA 90802 Reference No:			
David L. Gould Company Merchant Account	Credit Card Merchant Charges & Expenses	S	924.40
Long Beach CA 90802 Reference No:			

Office Expenses

222.90

Summary	SUBTOTAL	\$ 1647.30
1. Payments of \$100 or More (Include all Schedule B subtotals)\$	1647.30)
2. Payments under \$100 This Period (Not itemized)\$	0.0)
3. Total Payments This Period (Line 1 + Line 2). Enter here and in Column A, Line 2, of the Summary of Payments section on Page 1\$	1647.3)

GOULD & ORELLANA,LLC

CA 90802

Long Beach Reference No:

Schedule C Persons Receiving \$1,000 Or More

	SCHEDULE C
Statement covers period	CALIFORNIA 101
from07/01/2020	1992 FORM 4U I
through <u>09/19/2020</u>	17/17
	I.D. NUMBER
	599015

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

OUR VOICE, LATINO VOTER GUIDE

You must identify each individual listed on your Statement of Organization (Form 400) who received, directly or indirectly, \$1,000 or more from the organization during the period. (See instructions on reverse regarding "indirect" payments.)

NAMES OF INDIVIDUALS RECEIVING \$1,000 OR MORE	AMOUNT THIS PERIOD	CUMULATIVE SINCE JANUARY 1	
GOULD & ORELLANA,LLC	222.90	1970.49	